

Laurel Heights Campus 3333 California Street Suite 465, Box 0848 San Francisco, CA 94143-0848 Tel: (415) 476-7407 Fax: (415) 476-7744

## Postdoctoral Fellowship "Psychology and Medicine: Translational Research on Stress, Behavior and Disease" University of California, San Francisco

**Program Focus.** This NIMH-funded postdoctoral program trains researchers to link basic psychological theories and research to preventing and ameliorating disease. There are two areas, and cross-cutting both areas is a consideration of disparities in mental and physical illness and the mechanisms by which they occur. The two areas are: (1) *Health-risking behavior:* Fellows in this area focus on developing and applying theories of risk perception, social learning, cognitive development, and risk-taking to understand and modify health-risk behaviors, especially those that contribute to exposure to the HIV virus, as well as those contributing to addictive behaviors. There is an emphasis on developmental processes and on adolescence as a critical period. (2) *Stress, depression, psychobiology and disease:* Fellows in this area focus on theories of the meaning and appraisal of stress, cognitive and affective responses that result from these appraisals, and biological concomitants of these responses that result in disease. We emphasize common pathways to multiple disease outcomes, especially those spanning mental and physical illness.

<u>Program Structure</u>. Fellows will be appointed for two years. In some instances, an optional third year may be possible. It is expected that about one-third of the fellow's time will be spent in formal seminars. All fellows take a core Health Psychology Seminar and a Research Process Seminar in both years of the fellowship and may take other courses and seminars.

The remaining two-thirds of the fellows' time will be spent in research. Fellows will participate in their faculty mentor's research laboratory and will develop their own research study.

**Faculty.** There are 22 core faculty in the program and 35 affiliated faculty including psychologists, psychiatrists, internists, pediatricians, and sociologists. Fellows will be expected to work with a primary mentor from among the core faculty, but also with other core and affiliated faculty.

<u>Stipend</u>. Stipend levels are set by NIMH and depend on years of related experience. They range from \$35,568 to \$51,036.

Admissions Procedure. The program is designed to provide an extension of research training for those who have obtained a Ph.D. in Psychology. However, we will consider applicants with other doctoral degrees or with professional degrees (e.g., MDs) if they can establish their mastery of psychological theory and methods needed to undertake postdoctoral research training. In order to qualify for this federally funded grant, an applicant must be a U.S. citizen, a non-citizen national or a foreign national possessing a visa permitting permanent residence in the U.S.; having a temporary or student visa is not acceptable under this grant. However, we would be happy to consider applications of non-citizens if applicants are able to find funding individually through their own government or other sources.

Applicants should send a letter describing (1) their background, (2) area of interest, and (3) what they would like to accomplish in their postdoctoral training. A curriculum vitae should be included. Applicants should also arrange for three letters of reference to be sent directly to us. All correspondence should be addressed to:

Dr. Nancy Adler c/o Marilyn Vella University of California, San Francisco Health Psychology Program 3333 California Street, Suite 465 San Francisco, CA 94143-0848

(Zip code for FedEx: 94118)

Tel: 415-476-7285 Fax: 415-476-7744

Email: <u>HealthPsychology@ucsf.edu</u>

Soon after the closing date for applications, we will review all applications and identify the most competitive applicants at that time. We will ask for phone or in-person interviews to help make final decisions and to determine which faculty member would be the most appropriate to serve as a primary mentor. Final decisions will be made on the basis of the strength of the applicant, fit with the program, and maintaining a balance of interests among the fellows.

**Applications are due by February 1, 2006.** Fellows must begin the program by August 2006 and must have completed the Ph.D. and have supporting documentation (or other doctoral-level degree) by that time.

The Faculty of the Department of Psychiatry of the University of California, San Francisco, affirms as one of its major priorities the training of women and minorities for academic careers.

Website: <a href="http://healthpsych.ucsf.edu/">http://healthpsych.ucsf.edu/</a>

## **OVERVIEW OF FACULTY INTERESTS AND EXPERTISE**

	Major theoretical perspective	Problem/Area studied	Expertise or methodology
Nancy Adler, PhD	Social-cognitive models; secondary: stress and coping theory	Reproductive health and STDs; risk- taking behaviors; socioeconomic determinants of health	Quasi-experimental design; field research; multi-level designs
Patricia Areán, PhD	Social learning theory	Depression, mild cognitive impairment, substance abuse (all in late life and ethnic minorities)	Clinical trials
Elissa Epel, PhD	Stress, appraisal, and coping theory; translational neuroscience	Psychoneuroendocrinology; major depression, chronic stress, and medical comorbidity (obesity, risk for cardiovascular disease); aging	Observational cohort studies; experimental design; psychobiological reactivity
Susan Folkman, PhD	Stress, appraisal, and coping theory	AIDS; caregiving; bereavement	Observational cohort studies
Cynthia Gómez, PhD	Psychodynamic, cultural and ecological theories of change	HIV; sexual and reproductive health; economics and health	Behavioral epidemiology; intervention development; clinical trials
Sharon Hall, PhD	Social learning theory	Drug abuse and dependence	Clinical trials and process methods
Bonnie Halpern-Felsher, PhD	Expectancy-value models; cognitive appraisals; theories of decision-making	Adolescent decision-making and risk perceptions concerning risk behaviors, including tobacco and alcohol use and sexual behavior	Survey development; quantitative and qualitative methodology
Margaret Kemeny, PhD	Cognitive appraisal models of emotion	Psychoneuroimmunology; emotion/mood regulation; inflammatory diseases; HIV	Experimental designs; randomized clinical trials; observational cohort studies
Alicia Lieberman, PhD	Attachment theory and trauma theory and research	Traumatic stress and traumatic bereavement in infancy and early childhood	Clinical trials
Charles Marmar, MD	Translational neuroscience	PTSD	Multi-level modeling of risk and resilience
Susan Millstein, PhD	Behavioral decision theory; emotion regulation; cognitive development	Risk judgment; decision-making; risk behavior	Survey research; qualitative- quantitative mix; experimental design
David Mohr, PhD	Cognitive-behavioral theory; translational neuroscience as applied to psychosocial interventions	Depression and multiple sclerosis	Randomized clinical trials
Stephen Morin, PhD	Social action theory; diffusion of Innovation theory	HIV/AIDS policy and intervention	Randomized controlled clinical trials; qualitative research; policy analysis
Judith Moskowitz, PhD	Stress and coping theory	HIV and other chronic illnesses; chronic stress	Longitudinal field studies
Ricardo Muñoz, PhD	Social learning theory; cognitive- behavioral interventions	Depression prevention and treatment; impact of depression on other health problems, especially smoking	Randomized control trials; Internet research; work with Spanish-speaking populations
Thomas Neylan, MD	Psychobiology: sleep physiology; neuroendocrinology; neuropeptides; brain imaging; psychopharmacology	Posttraumatic stress disorder; insomnia; major depression	Sleep Disorders: polysomnography, quantitative sleep EEG analysis; psychopharmacology- clinical trials
Lauri Pasch, PhD	Stress, coping and adaptation; cognitive behavioral theory	Marital relationships and health; social support; Infertility; arthritis; breast cancer	Laboratory observational studies; field research; clinical trials
Victor Reus, MD	Biological determinants of behavior	Bipolar disorder, depression, Tourette disorder, nicotine dependence	Psychopharmacology, clinical trials, genetics, neuroendocrinology
Jeanne Tschann, PhD	Family systems theory; stress and coping	Parental conflict; adolescents' sexual relationships, sexuality, risk behavior, violence	Path models

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Constance Weisner, DrPH	Individual, organizational, and environmental models of access and utilization of health care	Alcohol and drug abuse	Clinical and health services trials, cost-effectiveness
Owen Wolkowitz, MD	Biological psychiatry	Depression; stress; anxiety; substance abuse and dementia; psychoneuroendocrinology	Clinical trials; psychopharmacology
Kristine Yaffe, MD	Geriatric psychiatry	Dementia; geriatric depression	Clinical trials; prospective cohorts with repeated measures

Updated 11/05

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